

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	DT		10-16-00
O.I.P.E. CLASSIFIER			10/23/00
FORMALITY REVIEW	21		
RESPONSE FORMALITY REVIEW	7143	11/17/00	

### INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral).... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	10/22/00
1	✓
2	✓
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4	✓
5	✓
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7	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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